## PATENT APPLICATION EE DETERMINATION RECORD Effective October 1, 2004

Application or Docket Number 10/510057

|  |   | CLAIMS A                                  | S FILED - I   |                | (Column 2)                      |                  |              | SMALL EN<br>TYPE    |                        | OR                            | OTHER<br>SMALL      |                        |  |
|--|---|---|---------------|----------------|---------------------------------|------------------|--------------|---------------------|------------------------|-------------------------------|---------------------|------------------------|--|
| TOTAL CLAIMS   |   |   |               |                |                                 |                  |              | RATE                | FEE                    |                               | RATE                | FEE                    |  |
| FOR  |   |   | NUMBER FI     | LED            | NUM                             | BER EXTRA        |              | BASIC FEE           |                        | OR                            | BASIC FEE           | <i>9</i> 50            |  |
| TOT  | AL CHARGEAB   | LE CLAIMS                                 | 2/ minus 20 = |                |                                 | ,                |              | X\$9=               |                        | OR                            | X \$ 18 =           | 18                     |  |
| INDE   | PENDENT CLA   | AIMS                                      |               | inus 3 =       | -1                              |                  |              | X \$ 44 =           | •                      | OR                            | X \$ 88 =           | 88                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |   |               |                |                                 |                  |              | + \$ 150 =          |                        | OR                            | + \$ 300 =          | _                      |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |               |                |                                 | J :              | TOTAL        |                     | OR                     | TOTAL                         | 1035                |                        |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)             |   |   |               |                |                                 |                  | SMALL ENTITY |                     |                        | OTHER THAN<br>OR SMALL ENTITY |                     |                        |  |
| dt A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | NUA<br>PREVI   | HEST<br>MBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |              | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| OME  | Total   | . 21                                      | Minus         | <del>-</del> 7 | 4                               | •                |              | X\$9=               |                        | OR                            | X \$ 18 =           |                        |  |
| AMENDMENT A  | Independent   | •4  | Minus         | *** (          | 1                               | =                |              | X \$ 44 =           |                        | OR                            | X \$ 88 =           |                        |  |
| 1  | FIRST PRESE   | NTATION OF                                | AULTIPLE DEP  | ENDEN          | CLAIM                           |                  |              | + \$ 150 =          |                        | OR                            | + \$ 300 =          |                        |  |
| Г  |   |   |               |                |                                 |                  |              |                     |                        | OR                            | TOTAL<br>ADDIT. FEE |                        |  |
| i  |   | (Column 1)                                |               | (Colu          | mn 2)                           | (Column 3)       |              |                     |                        |                               |                     |                        |  |
| 8 13   |   | CLAIMS REMAINING AFTER AMENDMENT          |               | NUN<br>PREV    | HEST<br>ABER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |              | RAȚE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| OWE  | Total   | •   | Minus         | ##             |                                 | 8                |              | X \$ 9 =            |                        | OR                            | X \$ 18 =           |                        |  |
| AMENDMENT B  | Independent   | •   | Minus         | ***            |                                 | c                |              | X \$ 44 =           |                        | OR                            | X \$ 88 =           |                        |  |
|  | FIRST PRESE   | NTATION OF I                              | MULTIPLE DEP  | ENDEN          | T CLAIM                         |                  |              | + \$ 150 =          |                        | OR                            | + \$ 300 =          |                        |  |
|  |   |   |               |                |                                 |                  |              | TOTAL<br>ADDIT. FEE |                        | OR                            | TOTAL<br>ADDIT. FEE |                        |  |
| (Column 1) (Column 2) (Column 3)   |   |   |               |                |                                 |                  |              |                     |                        |                               |                     |                        |  |
| ۲<br>۲<br>۲  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | NUI<br>PREV    | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |              | RATE                | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| DME  | Total   | •   | Minus         | **             |                                 | e                |              | X\$9=               |                        | OR                            | X \$ 18 =           |                        |  |
| AMENDMENT  | Independent   | •   | Minus         | ***            |                                 |                  |              | X \$ 44 =           |                        | OR                            | X \$ 88 =           |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |               |                |                                 |                  | j            | + \$ 150 =          |                        | OR                            | + \$ 300 =          |                        |  |
| ·  |   |   |               |                |                                 |                  |              | TOTAL<br>ADDIT. FEE |                        | OR                            | ADDIT. FEE          |                        |  |
|  | * If the entry in column 1 is less than the entry in column 2, write "V" in column 3. |   |               |                |                                 |                  |              |                     |                        |                               |                     |                        |  |